

Complete insurance-related information is provided prior to concluding the contract and is available in the General Insurance Terms and Conditions, along with attachments.

What type of insurance is this?

Health insurance, providing the insured with medical services



What is the subject of the insurance?

The health of the insured, the care of which involves providing medical services at selected medical facilities in the following range:

- ✓ consultations with specialist doctors - comprehensive coverage: internist, paediatrician, allergist, general surgeon, dermatologist, diabetes specialist, endocrinologist, speech pathologist, gastroenterologist, cardiac surgeon, cardiologist, ENT specialist, neurosurgeon, neurologist, ophthalmologist, oncologist, orthopaedist, pulmonologist, radiologist, rheumatologist, urologist
- ✓ home visits from internist/paediatrician
- ✓ hospital services, including specialist treatment: operations and procedures in the field of surgery, gynaecology, internal medicine, cardiology, ENT, neurosurgery, ophthalmology, orthopaedics, paediatrics, urology and hospital diagnostics
- ✓ highly specialised procedures, including same-day surgery
- ✓ laboratory tests and diagnostics - comprehensive coverage, including: specialised laboratory tests, allergy tests, ECG, Holter ECG and RR, EEG, X-ray and ultrasound, endoscopic examination, computed tomography (CT), magnetic resonance imaging (MRI)
- ✓ pregnancy management package
- ✓ 30 physiotherapy treatments a year
- ✓ flu vaccination
- ✓ ambulance and medical transport
- ✓ emergency medical services - 24/7 Medicover Hot Line
- ✓ dental check-up and cleaning (scaling)
- ✓ foreign travel insurance (Colonnade reinsurance) covering medical costs related to sudden illness or accident



What is not covered by insurance?

- ✗ the cost of purchasing medications, prostheses, implants, stimulators, pacemakers, valves, lenses, glasses, contact lenses, or highly specialised medical supplies



What are the limitations of insurance coverage?

Insurance coverage does not extend to the following:

- ! hospital services and highly specialised procedures during the grace period: 90 days from the start of insurance coverage, or 12 months if the service is related to a pre-existing health condition
- ! if the medical service was intended for, was the result of, or was caused by:
 - self-inflicted injury, suicide attempt
 - participating in extreme sports
 - being under the influence of alcohol, drugs or other
 - intoxicants
 - organ and tissue transplantation
 - chronic dialysis treatment
 - chemotherapy, radiotherapy or thermal ablation – embolization
 - gender reassignment treatment and surgery
 - conditions related to HIV infection or AIDS
 - treatment considered to be experimental
 - aesthetic or cosmetic medicine
- ! over the age of 75
- ! foreign travel coverage in the following cases:
 - over the age of 70
 - related to the last trimester of pregnancy and childbirth
 - a medical condition diagnosed and untreated prior to insurance coverage



Where does insurance coverage apply?

- ✓ at Medicover healthcare centres in Poland: Medicover Centre and partner facilities
- ✓ as part of foreign travel coverage while traveling outside Poland or the insured's country of permanent residence



What are the responsibilities of the insured?

- timely payment of premiums in the amount and by the date specified in the policy



How and when should premiums be paid?

- in a method and frequency agreed to with the Insurer



When does insurance coverage begin and end?

- insurance coverage begins on the date agreed to with the Insurer and ends after 12 months, with the possibility of extending the contract



How to terminate the contract?

- the insurance contract may be terminated in writing with a 30-day notice period, calculated from the first day of the month of insurance following the day when the Insurer receives a written withdrawal from the contract